

MAR 19 2010

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Please type or print in ink

10 MAR 22 AM 9:21 Public Document

| | | | | |
|-----------------|---------|----------|--------------------------|--------------------------|
| NAME (LAST) | (FIRST) | (MIDDLE) | DAYTIME TELEPHONE NUMBER | |
| Mc Daniel | Leigh | W. | | |
| MAILING ADDRESS | STREET | CITY | STATE | ZIP CODE |
| | | | | OPTIONAL: E-MAIL ADDRESS |

1. Office, Agency, or Court

Name of Office, Agency, or Court:

Glenn County

Division, Board, District, if applicable:

Board of Supervisors

Your Position:

County Supervisor

► If filing for multiple positions, list additional agency(ies)/
position(s): (Attach a separate sheet if necessary.)

Agency: See attached list

Position: Alternate delegate, member, council member

2. Jurisdiction of Office (Check at least one box)

☐ State☐ County of _____☐ City of _____☒ Multi-County see attached list☐ Other _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial Date: ____/____/____☒ Annual: The period covered is January 1, 2009,
through December 31, 2009.

-or-

☐ The period covered is ____/____/____, through
December 31, 2009.☐ Leaving Office Date Left: ____/____/____
(Check one)☐ The period covered is January 1, 2009, through the
date of leaving office.

-or-

☐ The period covered is ____/____/____, through
the date of leaving office.☐ Candidate Election Year: _____

4. Schedule Summary

► Total number of pages
including this cover page: 5► Check applicable schedules or "No reportable
interests."I have disclosed interests on one or more of the
attached schedules:Schedule A-1 ☐ Yes - schedule attached
*Investments (Less than 10% Ownership)*Schedule A-2 ☒ Yes - schedule attached
*Investments (10% or Greater Ownership)*Schedule B ☒ Yes - schedule attached
*Real Property*Schedule C ☒ Yes - schedule attached
*Income, Loans, & Business Positions (Income Other than Gifts
and Travel Payments)*Schedule D ☐ Yes - schedule attached
*Income - Gifts*Schedule E ☐ Yes - schedule attached
Income - Gifts - Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this
statement. I have reviewed this statement and to the best
of my knowledge the information contained herein and in any
attached schedules is true and complete.

Date Signed _____

Sig _____

FORM 700 Statement of Economic Interests for Calendar Year 2009/10

List of Agencies and Member Counties

Agency

Position

| | |
|---|--------------------|
| CRHMFA Homebuyers Fund | Alternate Delegate |
| Rural Health Joint Powers Authority | Alternate Delegate |
| California Rural Home Mortgage Finance Corp | Alternate Delegate |
| Environmental Services Joint Powers Authority | Alternate Delegate |
| California Local Government Finance Authority | Alternate Delegate |

List of Member Counties

| | |
|------------------|------------------------|
| Alpine County | Modoc County |
| Amador County | Mono County |
| Butte County | Napa County |
| Calaveras County | Nevada County |
| Colusa County | Placer County |
| Del Norte County | Plumas County |
| El Dorado County | San Benito County |
| Glenn County | San Luis Obispo County |
| Imperial County | Shasta County |
| Inyo County | Sierra County |
| Lake County | Siskiyou County |
| Lassen County | Sutter County |
| Madera County | Tehama County |
| Mariposa County | Trinity County |
| Merced County | Tuolumne County |

Agency

Position

| | |
|---|----------------|
| Glenn County Airport Land Use Commission | Member |
| Sacramento Valley Basinwide Air Pollution Control Council | Council Member |

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

| |
|---|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name Leigh W. McDaniel |

| | |
|---|---|
| 1. BUSINESS ENTITY OR TRUST | |
| Highland Vineyards | |
| Name P.O. Box 922, Orland, CA, 95963 | |
| Address (Business Address Acceptable) | |
| Check one <input type="checkbox"/> Trust, go to 2 <input checked="" type="checkbox"/> Business Entity, complete the box, then go to 2 | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY Agriculture | |
| FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE: ____/____/09 ____/____/09 ACQUIRED DISPOSED |
| NATURE OF INVESTMENT <input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> Partnership <input type="checkbox"/> Other | |
| YOUR BUSINESS POSITION Partner | |

| | |
|--|--|
| 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME IN THE ENTITY/TRUST) | |
| <input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input checked="" type="checkbox"/> \$1,001 - \$10,000 | <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000 |

| |
|---|
| 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary) |
| |
| |

| | |
|---|---|
| 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST | |
| Check one box: <input type="checkbox"/> INVESTMENT <input type="checkbox"/> REAL PROPERTY | |
| Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property | |
| Description of Business Activity or City or Other Precise Location of Real Property | |
| FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE: ____/____/09 ____/____/09 ACQUIRED DISPOSED |
| NATURE OF INTEREST <input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership <input type="checkbox"/> Leasehold _____ Yrs. remaining <input type="checkbox"/> Other _____ | |
| <input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached | |

| | |
|---|---|
| 1. BUSINESS ENTITY OR TRUST | |
| Ross Family CoTenancy | |
| Name P.O. Box 922, Orland, CA, 95963 | |
| Address (Business Address Acceptable) | |
| Check one <input type="checkbox"/> Trust, go to 2 <input checked="" type="checkbox"/> Business Entity, complete the box, then go to 2 | |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY Agriculture | |
| FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE: ____/____/09 ____/____/09 ACQUIRED DISPOSED |
| NATURE OF INVESTMENT <input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> Partnership <input type="checkbox"/> Other | |
| YOUR BUSINESS POSITION spouse to partner | |

| | |
|--|--|
| 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME IN THE ENTITY/TRUST) | |
| <input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input checked="" type="checkbox"/> \$1,001 - \$10,000 | <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000 |

| |
|---|
| 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary) |
| |
| |

| | |
|---|---|
| 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST | |
| Check one box: <input type="checkbox"/> INVESTMENT <input type="checkbox"/> REAL PROPERTY | |
| Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property | |
| Description of Business Activity or City or Other Precise Location of Real Property | |
| FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE: ____/____/09 ____/____/09 ACQUIRED DISPOSED |
| NATURE OF INTEREST <input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership <input type="checkbox"/> Leasehold _____ Yrs. remaining <input type="checkbox"/> Other _____ | |
| <input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached | |

Comments: _____

SCHEDULE B
Interests in Real Property
(Including Rental Income)

| |
|--|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Leigh W. McDaniel |
|--|

► STREET ADDRESS OR PRECISE LOCATION
 Parcel No. 024-150-008

CITY
 Orland, CA

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

ACQUIRED: ____/____/09 DISPOSED: ____/____/09

NATURE OF INTEREST

☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold ☐ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

► STREET ADDRESS OR PRECISE LOCATION
 Parcel No. 024-160-028

CITY
 Orland, CA

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☒ Over \$1,000,000

ACQUIRED: ____/____/09 DISPOSED: ____/____/09

NATURE OF INTEREST

☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold ☐ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

☐ Guarantor, if applicable

Comments: Regular course of business loans only

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Leigh W. McDaniel

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Marybelle Farms, Inc.

ADDRESS (Business Address Acceptable)

P.O. Box 922 Orland, CA, 95963

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Agriculture

YOUR BUSINESS POSITION

Manager

GROSS INCOME RECEIVED

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☒ \$10,001 - \$100,000

☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Sale of

(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other

(Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Sale of

(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other

(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

INTEREST RATE

_____%

☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None

☐ Personal residence

☐ Real Property

Street address

City

☐ Guarantor

☐ Other

(Describe)

Comments: Regular course of business loans only